26039262217

FAX

TO: FEC Staff

FROM: Cynthia Lewin
National Wildlife Action

DATE: 10/31/06

PAGES: 7

I have filed this twice today & received a receipt says it has been successfully filed but no confirming email. I am therefore faxing it to be sure it is timely filed. Please contact me at (703) 438-6953 with any questions.

Cynthia Lewin

FEC FORM 9

24 Hour Notice of Disbursements/Obligations for Electioneering Communicatic

1. Individual, Organization or Qualified Nonprofit Corporation Making the Disbursement/Obliga

(a) Name *
National Wildlife Action

(b) Address (number and street) * ☐ check if different than previously reported
11199 Wildlife Center Drive

(c) City: Reston
State: Virginia
Zip: 20190

(d) Name of Employer or Principal Place of Business: NA
(e) Occupation: NA

2. FEC Identification Number C

3. Is this report an amendment?* ○ Yes ◉ No

4. Covering Period 10/25/2006 (mm/dd/yyyy) through 10/30/2006 (mm/dd/yyyy)

5. (a) Date of Public Distribution(s) 10/30/2006 (mm/dd/yyyy)
(b) Communication Title Land Grab

6. Is the Filer a Qualified Nonprofit Corporation under 11 CFR 114.10(c)? Yes ◉ No ○

7. Were the disbursements for the electioneering communication made exclusively from donations segregated bank account?
Yes ◉ No ○

8. Custodian of Records
(a) Name
Susan Brown

(b) Address (number and street)
11100 Wildlife Center Drive

City: Reston
State: Virginia
Zip: 20190

(d) Name of Employer or Principal Place of Business: National Wildlife Action
(e) Occupation: Executive Director

9. Total Donations This Statement 24000.00

10. Total Disbursements/Obligations This Statement 18000.00

11. List of Person(s) Sharing/Exercising Control Add Another Person

(use the Add Another Person button to add as many people as necessary)

Delet

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FEC FORM 9

Oucle Gomez-Zormelo

(b) Address (number and street)

11100 Wildlife Center Drive

City	State	Zip
Reston	Virginia	20190

(d) Name of Employer or Principal Place of Business

National Wildlife Federation

(e) Occupation

Chief Financial Officer

Delet

Person Record #6.

(a) Name *

Mary C. Harris

(b) Address (number and street)

11100 Wildlife Center Drive

City	State	Zip
Reston	Virginia	20190

(d) Name of Employer or Principal Place of Business

Self-employed

(e) Occupation

Consultant

Delet

Person Record #7.

(a) Name *

Cynthia M. Lewin

(b) Address (number and street)

11100 Wildlife Center Drive

City	State	Zip
Reston	Virginia	20190

(d) Name of Employer or Principal Place of Business

National Wildlife Federation

(e) Occupation

General Counsel

Delet

Person Record #8.

(a) Name *

James Lyon

(b) Address (number and street)

11100 Wildlife Center Drive

City	State	Zip
Reston	Virginia	20190

(d) Name of Employer or Principal Place of Business

National Wildlife Federation

(e) Occupation

Senior Vice President

Delet

Person Record #9.

(a) Name *

William Mitchell

(b) Address (number and street)

26039262219

11100 Wildlife Center Drive

City: Reston State: Virginia Zip: 20190

(d) Name of Employer or Principal Place of Business: Self-employed

(e) Occupation: Consultant

Delet

Person Record #10.

(a) Name *: Larry J. Schweiger

(b) Address (number and street): 11100 Wildlife Center Drive

City: Reston State: Virginia Zip: 20190

(d) Name of Employer or Principal Place of Business: National Wildlife Federation

(e) Occupation: President

Delet

Person Record #11.

(a) Name *: Gene Stout

(b) Address (number and street): 11100 Wildlife Center Drive

City: Reston State: Virginia Zip: 20190

(d) Name of Employer or Principal Place of Business: Self-employed

(e) Occupation: Consultant

Delet

Person Record #12.

(a) Name *: Tom Warren

(b) Address (number and street): 11100 Wildlife Center Drive

City: Reston State: Virginia Zip:

(d) Name of Employer or Principal Place of Business: Fort Carson

(e) Occupation: Director of Environmental Compliant

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SCHEDULE 9-A

Add Another I

Donation(s) Received

26039262226

(use the Add Another Donation button to add as many donations as necessary)

Delet

Donation #1.

Entity Type of Donor*
Individual (a person)

Full Name of Donor*

Organization Name

-or-

Last Name Michaels *First Name* Laurie

Middle Name *Prefix* *Suffix*

Date of Receipt*
10/25/2006 (mm/dd/yyyy)

Amount *
12,000.00

Mailing Address of Donor
Suite 3300
301 Commerce Street

City Fort Worth **State** Texas **Zip** 76102

Delet

Donation #2.

Entity Type of Donor*
Individual (a person)

Full Name of Donor*

Organization Name

-or-

Last Name Bonderman *First Name* David

Middle Name *Prefix* *Suffix*

Date of Receipt*
10/25/2006 (mm/dd/yyyy)

Amount *
12,000.00

Mailing Address of Donor
Suite 3300
301 Commerce Street

City Fort Worth **State** Texas **Zip** 76102

TOTAL This Period (Tally this total to Line 9) 24000.00

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SCHEDULE 9-B

Add Another Disbur

Disbursement(s) Made or Obligation(s)
(use the Add Another Disbursement button to add as many disbursements as necessary)

Delet

Disbursement #1.

Entity Type of Payee*

25039262221

FEC FORM 9

Person Record #1.

(a) Name *
Susan Brown

(b) Address (number and street)
11100 Wildlife Center Drive

City: Reston | State: Virginia | Zip: 20190

(d) Name of Employer or Principal Place of Business
National Wildlife Action

(e) Occupation
Executive Director

Delet

Person Record #2.

(a) Name *
Dan Chu

(b) Address (number and street)
11100 Wildlife Center Drive

City: Reston | State: Virginia | Zip: 20190

(d) Name of Employer or Principal Place of Business
National Wildlife Federation

(e) Occupation
Senior Vice President

Delet

Person Record #3.

(a) Name *
Martha Darling

(b) Address (number and street)
11100 Wildlife Center Drive

City: Reston | State: Virginia | Zip: 20190

(d) Name of Employer or Principal Place of Business
Self-employed

(e) Occupation
Consultant

Delet

Person Record #4.

(a) Name *
Tom Dougherty

(b) Address (number and street)
11100 Wildlife Center Drive

City: Reston | State: Virginia | Zip: 20190

(d) Name of Employer or Principal Place of Business
National Wildlife Federation

(e) Occupation
Senior Advisor to the President

Delet

Person Record #5.

(a) Name *

26039292222

Organization (not a committee and not a person)

Name of Payee *

Organization Name: Ridder/Braden, Inc.

-or-

Last Name: First Name:

Middle Name: Prefix: Suffix:

Mailing Address of Payee

Suite 1170

1900 Grant Street

City: Denver State: Colorado Zip: 80203

Name of Employer: NA Occupation: NA

Purpose of Disbursement (Including title(s) of communication(s)) *

Produce Land Grab radio ad, buy airtime

Date of Disbursement or Oblig

10/30/2006 (mm/dd/yyyy)

Amount *

18,000.00

Communication Date

10/30/2006 (mm/dd/yyyy)

Add Another Cand

Delete R

Name of Federal Candidate*: Richard Pombo

Office Sought *: (•) House ( ) Senate ( ) President

State*: California

District: 11

Disbursement/Obliga *

( ) Primary (•) Ge

( ) Other (specify) :

TOTAL This Period (Tally this total to Line 10) 18000.00

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Under penalty of perjury, I certify that this statement is true, correct and complete. In addition, if the electioneering c reported herein were made by a corporation, I certify that the corporation is a qualified nonprofit corporation under Commission's regulations.

SIGNATURE * Cynthia Lewi

DATE * 10/31/2006 (mm

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this statement to the penalti §437g.

FEC Form 9 (1

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For further information, contact:
Federal Election Commission, 999 E Street, N.W., Washington, D.C. 20463
Toll Free 800-424-9530, Local 202-694-1100

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Check HELP

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Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

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☐ Postmark Illegible	
☐ No Postmark	
☐ Overnight Delivery Service (Specify):	Shipping Date
☐ Received from House Records & Registration Office	Date of Receipt
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N/A PREPARER	N/A DATE PREPARED

(5/2004)

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